

Signature of Authorized Representative

BUSINESS LICENSES 1924 COUNCIL STREET PO BOX 326 FOREST GROVE, OR 97116-0326 PH (503) 992-3269 FAX (503)992-3199 WWW.FORESTGROVE-OR.GOV

## **APPLICATION FOR CITY BUSINESS LICENSE**

☐ This is an amended application

Date

	Business Name:		Business Owner: (if owned by a corporation, provide corporate name and local contact.)					
	Business Street Address:		Owner or Corporate Address (if different than Business Address):					
	Business Mailing Address (if different	):	Owner or Corporate Telephone (if different than Business Phone #):					
	Business Telephone:		Describe nature and type of business at this location:					
	Local Contact Name & Email (license	cannot be emailed):						
	Business/Building Square Footage:	Property Owner or	Management Company (if not	ement Company (if not owner): Phone:				
# of FTE working in Forest Grove (includes owners):			Fee owed (from fee calculation worksheet attached):					
Eı	mergency Contacts:				J			
	Primary emergency contact:		Phone: (Day and night)	Relationship to business/owner:				
Secondary emergency contact:		Phone: (Day and night)	Relationship to business/owner:	-				
*	this a home business? Yes  *Contact the Community Developme  *Yepe of Business:  Corporation Limited Liability Company (LLC)	☐ Limited Lia	your home business compli-	ile business?	_			
Bu	Business Category:  Contractor  - CCB #/exp date							
	- Metro #/exp date	(a copy o	or your Metro licelise is requ	area to be attached to approance, it approache)				

Print Name



Minimum amount due for new license \$60.00

\* Payment must be cash, check, or money order only.

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		]	Business Name			
BUSINESS LICENSE FEE	CALCULATION					
Application Fees:						
New Business License Ap	pplication Fee:	\$25.00		\$ 25.00		
PLUS:				+		
ANNUAL/RENEWAL (BASED C	N NUMBER OF FTES – s	see definition	below) *			
Businesses with 0 to 2.5 f	ull-time equivalents	\$35.00				
Businesses with 3 to 4.5 f	ull-time equivalents	\$50.00				
Businesses with 5 to 10.5	full-time equivalents	\$75.00				
Businesses with 11 to 50.	5 full-time equivalents	\$100.00				
Businesses with 51 or mo + \$1 per FTE over 50 Capped at \$250.00 an		\$100.00				
,,	•		Total number of FTEs			
<ul> <li>An employee worki considered full-time</li> <li>An employee worki seasonal employee</li> </ul>	<ul> <li>considered full-time and shall count as one (1) FTE.</li> <li>An employee working less than thirty-two (32) hours per week or who is a temporary or seasonal employee shall be counted as one-half (0.50) of an FTE.</li> <li>For a landlord/property owner, the FTE would be 1.</li> </ul>					
TOTAL AMOUNT DUE:				\$		

\* Contractors – There is no fee due if copy of active Metro license accompanies this application.

Also, please include a copy of your active CCB license. This must be kept up-to-date, or permits cannot be processed.